Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 19723508 **CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN** (Column 1) (Column 2) TYPE OR SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE BASIC FEE 710.00 FOR NUMBER EXTRA BASIC FEE 355.00 NUMBER FILED TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X40= X80= OR MULTIPLE DEPENDENT CLAIM PRESENT +270= +135= OR * If the difference in column 1 is less than zero, enter "0" in column 2 OR TOTAL TOTAL 7/0 **CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY** SMALL ENTITY OR (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE ENT **PREVIOUSLY AFTER EXTRA** FEE FEE **AMENDMENT** PAID FOR 夏 Total Minus X\$18= X\$ 9= OR ũ Independent Minus X80= X40= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR TOTAL OR ADDIT FEE ADDIT, FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ADDI-ADDI-8 NUMBER REMAINING PRESENT TIONAL **TIONAL** RATE RATE IENT **PREVIOUSLY AFTER EXTRA** PAID FOR FEE FEE AMENDMENT ENDM Total Minus X\$18= X\$ 9= OR Minus Independent X40= X80= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM BEST AVAILABLE COPY +270= +135= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE AMENDMENT AFTER **PREVIOUSLY EXTRA AMENDMENT** PAID FOR **FEE FEE** Total Minus X\$18= X\$ 9= OR Minus Independent X40= X80= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL OR ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.



This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 99/1566

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra X	Fee	Fcc =	Total
	Sm./Lg.			Sm, Entity	Lg. Entity	
Bask Filing Fee	201/101	1.10	$\mathcal{O}_{\mathcal{C}}$	1380		
Total Claims >20	203/103	<u>4</u> 8 -20	- 10 x	25)		
Independent Claims >3	202/102	·) -	4 x	186		
Mult. Dep Claim Present	204/104		•	<u> </u>	=	
Surcharge	205/105			65	√=	
English Tradslation	119	•		n	2,	
TOTAL FEE CALCULA	ATION	·	〈 -	ENE J		7
Fees due upon filing t	he application	1:			4	\ \ \
Total Filing Fees Due	= \$_	853	00	/ ASS	4	
Less Filing Fees Subm	nined - S _	0		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	104	D'E
BALANCE DUE	= \$	853-0		1 5	J. 100	All C.
	- 				1 /3 /10	<u>)</u> /

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)